

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
 3430 COURT HOUSE DRIVE
 ELLICOTT CITY, MD 21043
 PERMITS (410)313-2455 INSPECTIONS (410)313-1810
 AUTOMATED INFORMATION (410) 313-3800

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

B00136896

Building Address: 14772 Carriage Mill Rd
Woodlawn 2197

Property Owner's Name J. Frey & Partners LLC

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Address 14772 Carriage Mill Rd
 City Woodlawn State MD Zip Code 21977

Census Tract 604001 Subdivision Carriage Mill Farms

Home Phone _____ Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon):

Section 2 Area _____ Lot 34

Tax Map 8 Parcel 158 Grid 16

Zoning RCDED Map Coordinates 4C12 Lot size _____

Phone _____ Fax _____

Existing Use SEH

Contractor Company Addition Etc

Proposed Use SEH w/ Detached Garage

Contact Person Scott Payne

Estimated Construction Cost \$ 24,000

Address 4905 Mead Ln

Description of Work 1.5 story (Detached) 24x24 Garage

City Ellicott City State MD Zip Code 21042

(Detached)

License No. 67431

Phone 410-720-0176 Fax 410-750-3322

Occupant or Tenant Same

Engineer or Architect Company _____

Contact Name _____

Contact Person _____

Address _____

Address _____

City _____ State _____ Zip Code _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Utilities

Building Characteristics

Utilities

Height: _____
 No. of stories: _____
 Gross area, sq. ft. per floor: _____
 Use group: _____
 Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Water Supply:
 Public
 Private
 Sewage Disposal:
 Public
 Private
 Electric Yes No
 Gas Yes No
 Heating System:
 Electric Oil
 Natural Gas
 Propane Gas
 Sprinkler system: N/A
 Full
 Partial
 Other Suppression
 # of Heads _____

SF Dwelling SF Townhouse
 Depth _____ Width _____
 1st floor: _____
 2nd floor: _____
 Basement: _____
 Finished Basement Unfinished Basement
 Crawl space Slab on Grade
 No. of Bedrooms _____
 Multi-family dwellings:
 No. of efficiency units: _____
 No. of 1 BR units: _____
 No. of 2 BR units: _____
 No. of 3 BR units: _____
 Other Structure: _____
 Dimensions: _____
 Footings: Site
 Roof: Gable
 State Certified Modular
 Manufactured Home

Water Supply:
 Public
 Private
 Sewage Disposal:
 Public
 Private
 Electric Yes No
 Gas Yes No
 Heating System:
 Electric Oil
 Natural Gas
 Propane Gas
 Sprinkler system: N/A
 NFPA #13D
 NFPA #13R
 Other

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSES OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature _____

Print Name _____

Title/Company _____

Date _____

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY **

FOR OFFICE USE ONLY

AGENCY

DATE

SIGNATURE APPROVAL

DEP. SETBACK INFORMATION

PROPERTY ID#

43541

Land Development, DP2